



Town of Shirley

TOWN COLLECTOR/PARKING CLERK

7 KEADY WAY, SHIRLEY, MASSACHUSETTS 01464

Tel: (978) 425-2600, ext. 210
Fax: (978) 425-2681
E-mail: hhaase@shirley-ma.gov

PARKING TICKET APPEAL

**Appeals must be received within
Twenty-one (21) days of the date the ticket is issued**

Name: _____
Address: _____
City: _____ State: _____ Zip: _____
Tel. No.: _____

Parking Ticket Information:

Ticket Number: _____ Date Issued: _____
Vehicle Make: _____ Color: _____ Year: _____
Plate No.: _____ State: _____
Ticket Violation: _____

I wish to appeal this parking violation for the following reason(s):

Date: _____ Signature: _____

******For office use only******

Date Received: _____ By: _____

Hearing Date: _____

Appeal Has Been: _____ Approved _____ Denied _____ Other

Comments: _____

Hearings Officer: _____ Date: _____